

## THE CITY OF KEY WEST

Building Department P.O.Box 1409, Key West, FL 33040

Contractor Agent Authorization Letter
(\*\* note: this form must be completed each calendar year)

Contractor Company Name:	
Contractor Qualifier Name:	
Agent Name(s):	
I,, hereby authorize	the above listed agent(s) to sign
for permits forproject name/address, or unlimited	, for the calendar year ending
December 31, 2016.	
The undersigned understands the liabilities involved in the accepts full responsibility (thus holding the City of Key W the actions of the agent(s) named related to the acquisition company listed above.	est harmless) for any and all of
Signature of Contractor Qualifier	
State of	
Subscribed and sworn to before me this day	of, 20
Notary Public (seal)	